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TB CARE I

TB CARE I-Mozambique Malaria

**Year 1
Quarterly Report
October-December 2011**

January 30, 2012

Quarterly Overview

Reporting Country	Mozambique Malaria
Lead Partner	FHI
Collaborating Partners	KNCV, MSH, WHO
Date Report Sent	30/01/2012
From	Dário Sacur, Project Director, TB CARE I/Mozambique
To	Alfredo MacArthur, Activity Manager for TB CARE I, USAID/Mozambique
Reporting Period	October-December 2011

Technical Areas	% Completion
9. Malaria	80%
Overall work plan completion	80%

Most Significant Achievements

Antimalarial drug efficacy monitoring

Data collection started in June 2011 and the study included two arms, arm one (artemether-lumefantrine) and arm two (artesunate-amodiaquine). For arm one, data collection has been completed in all sites. From the 2,587 children pre-selected, 436 were recruited. However, 72 were excluded for various reasons and the final sample included 364 children that successfully concluded the study in this arm.

Due to logistical constraints, it was agreed that only three of the five sentinel sites would continue with recruitment of children for arm two (artesunate-amodiaquine). Data collection has been completed in two of the three sentinel sites. From the 2,154 pre-selected children, 261 were recruited, 214 completed the study and 28 are still in follow up. The remaining 19 were excluded from the study for various reasons.

Data analysis will start next quarter and the report is due to be completed by June 2012. A dissemination workshop will be organized in July. Publication of the results in a scientific journal will also follow.

Training of laboratory technicians (August 2011 - November 2011)

The objectives of this training were to update laboratory technicians in malaria diagnosis including identification of species and to train laboratory technicians in biosafety, laboratory management, quality assurance and supervision.

The first stage of the process was the training of regional trainers in the three regions of the country, namely south, center and north. The training of trainers was conducted by CDC experts and took place in Tete, Maputo and Sofala provinces. Overall, 65 laboratory technicians were trained at this stage, including 42 males and 23 females. The second stage was the cascade training of laboratory technicians at provincial level which was conducted between August and November 2011. In this quarter, 575 laboratory technicians were trained. Overall, 1,072 laboratory technicians were trained, of which 802 were males and 270 were females. The number of people trained (1,072 laboratory technicians and 65 trainers) corresponds to 94.7% of the 1200 laboratory staff existing in the country.

The training of laboratory technicians was a massive event and to mark its end a ceremony was organized in Lichinga, Niassa. The ceremony that received media coverage was attended by USAID and the Central MoH, and by the Governor and the Permanent Secretary of Niassa.

Monitoring and Evaluation

During this period, the three key NMCP documents (Malaria policy, Strategic Plan and M&E plan) were submitted to the Ministry of Health for approval. The printing and distribution of these documents will

be carried out using APA 2 funds.

Overall work plan implementation status

The overall work plan implementation status is about 80%.

With the exception of some M&E activities, all other activities planned for the quarter have been successfully implemented. In terms of M&E, the procurement of IT equipment for the NMCP was finalized but other planned activities were not implemented because the NMCP M&E focal point left the post.

Technical and administrative challenges

The major challenge of implementing malaria drug efficacy studies is to choose the right timing to implement the study. Experience attained previously has shown that it is very difficult to carry out the study during the rainy season, as the caregivers of the children are usually involved in agricultural activities, resulting in high lost to follow up. On the other hand, implementing the study during the dry season is problematic as there are fewer malaria cases and most of them do not present with high parasite density [which was one of the inclusion criteria]. These logistic constraints explain the long recruitment period observed in our study.











In relation to the cascade training, it was difficult to obtain accurate data on the number of laboratory technicians to be trained. The data sent by the Provincial Directorates of Health were consistently lower than the number of lab technicians found on the ground. In addition, there were insufficient laboratory materials (cell counters) and malaria reagents and consumables for the practical sessions.

Initially, it was planned to include a component of quality assurance in the cascade training of laboratory technicians. However, this was not done as the consultant initially identified was not available. The plan is to include this component in the supervision visits to be carried out during the

Quarterly Technical Outcome Report

Technical Area		9. Malaria						
Expected Outcomes		Outcome Indicators	Indicator Definition	Baseline	Target	Result	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
					Y1	Y1		
1.1	Malaria case management at health facilities improved	% of Malaria cases managed according to National guidelines	Numerator: Number of Malaria cases managed according National guidelines Denominator: Total number of Malaria cases notified at the health facility	59 (HFS 2006)	100	NA	Curricula and plan for district training finalized. National and provincial training for clinicians concluded	The training of clinical staff was supposed to be carried out by the ministry of health. However, due to financial constraints this training did not take place. It has been included in APA2
1.2	Malaria diagnosis and treatment expanded to community level	% of Malaria cases diagnosed through Rapid Diagnostic Tests by community health workers	Numerator: Number of Malaria cases diagnosed through Rapid Diagnostic Tests by community health workers Denominator: Total number of people with symptoms of fever	0	30	NA	The training curricula for community health workers was concluded during this quarter	The training of community health workers is linked with the training of clinicians. It will take place in APA2.
1.2	Malaria diagnosis and treatment expanded to community level	% of Malaria cases treated by community health workers	Numerator: Number of Malaria cases treated by community health workers Denominator: Total number of Malaria cases diagnosed through Rapid Diagnostic Tests by community health workers		10	NA	The training curricula for community health workers was concluded during this quarter	The training of community health workers is linked with the training of clinicians. It will take place in APA2
1.3	Malaria data management system strengthened	% of health facilities reporting correctly and timely Malaria cases	Numerator: Number of health facilities that reported Malaria cases correctly and on time Denominator: Total number of health facilities in the district	90	100	NA	M&E plan has been submitted for approval	After approval the M&E plan will be printed and disseminated. Reporting on this indicator can only start on year 2.

Quarterly Activity Plan Report

Outcomes	Outcome 1.1	9. Malaria	Lead Partner	Approved Budget	Cumulative Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
						Month	Year	
Malaria diagnostic system	1.1.1	Reference materials produced and distributed	FHI		 100%	Sep	2011	Materials have been delivered to NMCP
	1.1.2	Training courses for laboratory staff and VHWs organized	FHI		 100%	Nov	2011	Training of lab technicians has been completed. In total, 1,072 laboratory technicians were trained, of which 802 were males and 270 were females
	1.1.3	Supportive supervision conducted	FHI		 35%	Dec	2011	Supervision plan developed
	1.1.4	Internal Quality Assurance system set-up	FHI		 35%	Dec	2011	Identification of consultant and ToR developed, Earl Long, former CDC staff.
Outcomes	Outcome 1.2		Lead Partner	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
Drug efficacy study	1.2.1	Study protocol designed	FHI		 100%	April	2011	Completed.
	1.2.2	Protocol approved	FHI		 100%	May	2011	Completed.
	1.2.3	Study implemented	FHI		 99%	Nov	2011	All patients have been recruited. Awaiting data from the 20 patients that are completing their follow up period.
	1.2.4	Drug policy adjusted	FHI		Postponed	Jan	2012	This activity will take place during APA2. No additional funds will be required.
Outcomes	Outcome 1.3		Lead Partner	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
M&E system	1.3.1	Staff trained in GIS-based M&E system	FHI		Postponed			This activity has been cancelled because the M&E focal point at the NMCP left the post. It may be considered for APA3
	1.3.2	GIS-based M&E system developed	FHI		Postponed			This activity has been cancelled because the M&E focal point at the NMCP left the post. It may be considered for APA3
	1.3.3	Staff in provinces supervised	FHI		Postponed			This activity has been postponed because the M&E focal point at the NMCP left the post. It may be considered for APA3
Outcomes	Outcome 1.3		Lead Partner	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
Coordination	1.4.1	Platform for laboratory stakeholders established	FHI		 60%	Nov	2011	Consensus meeting to be held in April 2012
	1.4.2	Coordination activities organized	FHI		 90%			Ongoing
					 80%			

Quarterly Activity Plan Modifications

Request for Cancellation or Discontinuation of Activities										
Approved By (write dates)			Old Code		Lead Partner	Remaining Budget	New Code	Replace with the following activity (if any)	Lead Partner	Proposed Budget*
Mission	PMU	USAID		Activities from the Work Plan						

* Detailed budget is attached

Request for Postponement of Activities to Next Year						
Approved By (write dates)			Old Code	Activities from the Work Plan	Lead Partner	Remaining Budget
Mission	PMU	USAID				
				Supportive supervision conducted	FHI / Macepa	To be completed
				Drug policy adjusted	FHI	To be completed
				Staff trained in GIS-based M&E system	FHI	To be completed
				GIS-based M&E system developed	FHI	To be completed
				Staff in provinces supervised	FHI	To be completed
				GIS-based M&E system developed	FHI	To be completed

Request for Adding New Activities to the Current Work Plan						
Approved By (write dates)			New Code	Proposed New Activities	Lead Partner	Proposed Budget*
Mission	PMU	USAID				
September, 2011	21 Sep 2011			Procurement of a five-head microscope for training purposes	FHI	35,000,00
September, 2011						
September, 2011						
September, 2011						

* Detailed budget is attached

Quarterly Photos (as well as tables, charts and other relevant materials)



Facilitators for Cascade training in Beira

Opening ceremony



Lab practices 2 –Post-test





Government, USAID, FHI360 representatives during the Cascade training closing ceremony



Some of the trained laboratory technicians in Lichinga